

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Committee to Strengthen America

ADDRESS (number and street)

356 Morris Street

☐ Check if different than previously reported. (ACC)

Woodbury

NJ

08096

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00492165

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Year-End Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

NJ

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Robyn A. D. Ferdinand

Signature of Treasurer

Ms. Robyn A. D. Ferdinand

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X

Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Committee to Strengthen America

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
10		01		2012

To:

M M	/	D D	/	Y Y Y Y Y Y
11		26		2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="6">2012</td></tr></table>	Y	Y	Y	Y	Y	Y	2012							<table><tr><td colspan="6">44829.58</td></tr></table>	44829.58					
Y	Y	Y	Y	Y	Y															
2012																				
44829.58																				
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="6">51629.58</td></tr></table>	51629.58																		
51629.58																				
(c) Total Receipts (from Line 19)	<table><tr><td colspan="6">34500.00</td></tr></table>	34500.00						<table><tr><td colspan="6">75500.00</td></tr></table>	75500.00											
34500.00																				
75500.00																				
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="6">86129.58</td></tr></table>	86129.58						<table><tr><td colspan="6">120329.58</td></tr></table>	120329.58											
86129.58																				
120329.58																				
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="6">18169.75</td></tr></table>	18169.75						<table><tr><td colspan="6">52369.75</td></tr></table>	52369.75											
18169.75																				
52369.75																				
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="6">67959.83</td></tr></table>	67959.83						<table><tr><td colspan="6">67959.83</td></tr></table>	67959.83											
67959.83																				
67959.83																				
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Committee to Strengthen America

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		0	1		2	0	1	2		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	6		2	0	1	2		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	34500.00	75500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	34500.00	75500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	34500.00	75500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	34500.00	75500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	669.75	2369.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	669.75	2369.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	42500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	5000.00	7500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18169.75	52369.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18169.75	52369.75

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	34500.00	75500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34500.00	75500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	669.75	2369.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	669.75	2369.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

Full Name (Last, First, Middle Initial)

A. AMERICAN POSTAL WORKERS UNION AFL-CIO

Mailing Address 1300 L ST N W

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C70003322

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **01** / **2012**

Transaction ID : C4591163

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. APSCU Political Action Committee

Mailing Address 1101 CONNECTICUT AVENUE, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C C00213066

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / **05** / **2012**

Transaction ID : C4533066

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Cozen O'Connor PAC

Mailing Address 1900 Market Street

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing
federal political committee.

C C00196725

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

10 / **25** / **2012**

Transaction ID : C4572580

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

10000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

Full Name (Last, First, Middle Initial)

A. CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 Third Street N.W.

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00002089

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2012

Transaction ID : C4600232

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. IRONWORKERS POLITICAL ACTION LEAGUE

Mailing Address 1750 New York Ave. NW Ste. 400

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C C00027359

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2012

Transaction ID : C4600233

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. NEW JERSEY STATE LABORERS' PAC

Mailing Address 104 INTERCHANGE PALZA
STE 301

City State Zip Code
MONROE TWP NJ 08831

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 05 / 2012

Transaction ID : C4533056

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 18

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

A. Full Name (Last, First, Middle Initial)
PUBLIC SERVICE ENTERPRISE GROUP INC. POLITICAL ACTION COMMITTEE (PEGPAC)

Mailing Address 80 Park Plaza

City State Zip Code
Newark NJ 07102

FEC ID number of contributing
federal political committee.

C C00383489

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 12 / 2012

Transaction ID : C4533086

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)
THE DESERT CAUCUS

Mailing Address P.O. BOX 44146

City State Zip Code
TUCSON AZ 85733

FEC ID number of contributing
federal political committee.

C C00102368

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 05 / 2012

Transaction ID : C4533067

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
WALPAC

Mailing Address 702 S.W. 8TH STREET

City State Zip Code
BENTONVILLE AR 72716

FEC ID number of contributing
federal political committee.

C C00093054

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 05 / 2012

Transaction ID : C4533070

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

12000.00

TOTAL This Period (last page this line number only)..... ►

34500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 18

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

Full Name (Last, First, Middle Initial)

A. NGP Software

Mailing Address 1225 Eye Street

City Washington State DC Zip Code 20005

Purpose of Disbursement
campaign compliance software expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2012
Transaction ID : D487256

Amount of Each Disbursement this Period

525.00

Full Name (Last, First, Middle Initial)

B. TD Bank

Mailing Address 245 Park Ave

City Scotch Plains State NJ Zip Code 07076

Purpose of Disbursement
bank fees- credit card services fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2012
Transaction ID : D487254

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. TD Bank

Mailing Address 245 Park Ave

City Scotch Plains State NJ Zip Code 07076

Purpose of Disbursement
bank fees- credit card services fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2012
Transaction ID : D487255

Amount of Each Disbursement this Period

119.75

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

669.75

669.75

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

Full Name (Last, First, Middle Initial)

A. BOSWELL FOR CONGRESS

Mailing Address PO BOX 1814

City DES MOINES	State IA	Zip Code 50305
--------------------	-------------	-------------------

Purpose of Disbursement
campaign contribution

Candidate Name

LEONARD L. BOSWELLOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : D486318

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Carol Shea Porter for Congress

Mailing Address PO BOX 453

City ROCHESTER	State NH	Zip Code 03866
-------------------	-------------	-------------------

Purpose of Disbursement
campaign contribution

Candidate Name

CAROL SHEA-PORTEROffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NH District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : D486320

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. CASSANDRA SHOBER FOR CONGRESS

Mailing Address P.O. BOX 3399

City MARGATE	State NJ	Zip Code 08402
-----------------	-------------	-------------------

Purpose of Disbursement
campaign contribution

Candidate Name

CASSANDRA RANIERI SHOBEROffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : D486523

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

Full Name (Last, First, Middle Initial)

A. BEN CHANDLER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2012

Mailing Address P. O. BOX 12678

City	State	Zip Code
LEXINGTON	KY	40508

Transaction ID : D487248Purpose of Disbursement
campaign contribution

Candidate Name

A.B. III CHANDLERCategory/
Type

Amount of Each Disbursement this Period

500.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KY District: 06

Full Name (Last, First, Middle Initial)

B. Dina Titus for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Mailing Address PO BOX 72454

City	State	Zip Code
LAS VEGAS	NV	89170

Transaction ID : D486319Purpose of Disbursement
campaign contribution

Candidate Name

DINA TITUSCategory/
Type

Amount of Each Disbursement this Period

500.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NV District: 01

Full Name (Last, First, Middle Initial)

C. DUCKWORTH FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2012

Mailing Address P.O. BOX 59568

City	State	Zip Code
SCHAUMBURG	IL	60159

Transaction ID : D487247Purpose of Disbursement
campaign contribution

Candidate Name

L. TAMMY DUCKWORTHCategory/
Type

Amount of Each Disbursement this Period

500.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 08

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

Full Name (Last, First, Middle Initial)

A. FRIENDS OF CHARLIE WILSON

Mailing Address P.O. BOX 334

City BRIDGEPORT	State OH	Zip Code 43912
--------------------	-------------	-------------------

Purpose of Disbursement
campaign contribution

Candidate Name

CHARLES A WILSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2012

Transaction ID : D487251

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF DAN KILDEE

Mailing Address P.O. BOX 248

City FLINT	State MI	Zip Code 48501
---------------	-------------	-------------------

Purpose of Disbursement
campaign contribution

Candidate Name

DANIEL T KILDEEOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2012

Transaction ID : D487249

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAN MAFFEI

Mailing Address PO BOX 230

City SYRACUSE	State NY	Zip Code 13201
------------------	-------------	-------------------

Purpose of Disbursement
campaign contribution

Candidate Name

DANIEL BENJAMIN MR. MAFFEIOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2012

Transaction ID : D486322

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

Full Name (Last, First, Middle Initial)

A. FRIENDS OF LOIS CAPPS

Mailing Address P.O. BOX 23940

City	State	Zip Code
SANTA BARBARA	CA	93121

Purpose of Disbursement
campaign contribution

Candidate Name

LOIS CAPPSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2012

Transaction ID : D487244

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Gerry Connolly for Congress

Mailing Address 3706 PRADO PLACE

City	State	Zip Code
FAIRFAX	VA	22031

Purpose of Disbursement
campaign contribution

Candidate Name

GERRY CONNOLLYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2012

Transaction ID : D487243

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. JOHN CARNEY FOR CONGRESS

Mailing Address PO BOX 2162

City	State	Zip Code
WILMINGTON	DE	19899

Purpose of Disbursement
campaign contribution

Candidate Name

JOHN CHARLES JR CARNEYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: DE District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2012

Transaction ID : D487246

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

Full Name (Last, First, Middle Initial)

A. JOHN TIERNEY FOR CONGRESS

Mailing Address 133 WASHINGTON STREET

City	State	Zip Code
SALEM	MA	01970

Purpose of Disbursement
campaign contribution

Candidate Name

JOHN F TIERNEY

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : D486314

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. KATHY HOCHUL FOR CONGRESS

Mailing Address PO BOX 64

City	State	Zip Code
BUFFALO	NY	14231

Purpose of Disbursement
campaign contribution

Candidate Name

KATHLEEN COURTNEY HOCHUL

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2012

Transaction ID : D487240

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Kirkpatrick for Arizona

Mailing Address PO BOX 12011

City	State	Zip Code
CASA GRANDE	AZ	85130

Purpose of Disbursement
campaign contribution

Candidate Name

ANN KIRKPATRICK

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AZ District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : D486315

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

Full Name (Last, First, Middle Initial)

A. LOEBSACK FOR CONGRESS

Mailing Address PO BOX 3013

City	State	Zip Code
IOWA CITY	IA	52244

Purpose of Disbursement
campaign contribution

Candidate Name

DAVID WAYNE LOEBSACKOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2012

Transaction ID : D486317

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. MARK CRITZ FOR CONGRESS COMMITTEEMailing Address 647 MAIN STREET
SUITE 110

City	State	Zip Code
JOHNSTOWN	PA	15901

Purpose of Disbursement
campaign contribution

Candidate Name

MARK CRITZOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2012

Transaction ID : D487242

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. PERLMUTTER FOR CONGRESSMailing Address 3440 YOUNGFIELD STREET
#264

City	State	Zip Code
WHEAT RIDGE	CO	80033

Purpose of Disbursement
campaign contribution

Candidate Name

EDWIN G PERLMUTTEROffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2012

Transaction ID : D487245

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Strengthen America

Full Name (Last, First, Middle Initial)

A. TIM BISHOP FOR CONGRESS

Mailing Address PO BOX 437

City	State	Zip Code
FARMINGVILLE	NY	11738

Purpose of Disbursement
campaign contribution

Candidate Name

TIMOTHY BISHOPOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : D486321

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. TIM WALZ FOR US CONGRESS

Mailing Address PO BOX 938

City	State	Zip Code
MANKATO	MN	56002

Purpose of Disbursement
campaign contribution

Candidate Name

TIMOTHY J. WALZOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2012

Transaction ID : D487250

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

12500.00

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

Committee to Strengthen America

A. BURLINGTON COUNTY DEMOCRATIC COMMITTEE

Date of Disbursement

Transaction ID : D486524

Category/
Type

Disbursement For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Camden City Regular Democratic Organization

Mailing Address PO Box 1003

Date of Disbursement

City	State	Zip Code
Camden	NJ	08101-1003

Transaction ID : D487252

Purpose of Disbursement	party contribution

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

3000.00

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

5000.00

TOTAL This Period (last page this line number only).....

5000.00